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| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | Docket Number (Optional) 742406-3 | | | | | | | | | | | | | | | | | | | | | |
| CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)] I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop _____, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at _____, on _____. Signature: _____ Name: _____ | In re Application of Shinji NABESHIMA et al. | | | | | | | | | | | | | | | | | | | | | | |
| | Application Number 09/471,357 For RECORDING/REPRODUCTION DEVICE AND METHOD FOR DIGITAL BROADCASTING | Filed 12/23/1999 | | | | | | | | | | | | | | | | | | | | | |
| Group Art Unit 2616 | | Examiner Vincent F. Boccio | | | | | | | | | | | | | | | | | | | | | |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate entity fee are as follows (check time period desired):</p> <table> <tr> <td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)</td> <td>\$120.00</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Applicant claims small entity status.</td> <td></td> </tr> <tr> <td><input type="checkbox"/> A check to cover the fee is enclosed.</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</td> <td></td> </tr> <tr> <td><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-2380</u> I have enclosed a duplicate copy of this sheet.</td> <td></td> </tr> </table> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the <input type="checkbox"/> applicant/inventor</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record.</p> <p><input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) <u>32,815</u>.</p> <p><u>Donald R. Studebaker</u> Signature</p> <p>May 12, 2005 Date</p> <p>Donald R. Studebaker Typed or printed name</p> <p>202.585.8000 Telephone Number</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> | | | | <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120) | \$120.00 | <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450) | \$ _____ | <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020) | \$ _____ | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590) | \$ _____ | <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160) | \$ _____ | <input type="checkbox"/> Applicant claims small entity status. | | <input type="checkbox"/> A check to cover the fee is enclosed. | | <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. | | <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-2380</u> I have enclosed a duplicate copy of this sheet. | |
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120) | \$120.00 | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450) | \$ _____ | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020) | \$ _____ | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590) | \$ _____ | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160) | \$ _____ | | | | | | | | | | | | | | | | | | | | | | |
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| <input type="checkbox"/> Total of _____ forms are submitted. | | | | | | | | | | | | | | | | | | | | | | | |

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